2001 Utah HMO Performance Report How to Compare HMOs

Part II - 2001 HMO Performance Measures (HEDIS)



About HEDIS

Health Plan Employer Data and Information Set (HEDIS) measures are developed by the National Committee for Quality Assurance (NCQA), a not-for-profit organization that assesses, measures, and reports on the quality of health care provided by the nation's managed care industry.

Each HMO uses HEDIS as a measuring tool when collecting data from medical and/or administrative records. To assure the accuracy of HEDIS measures, the plans must have their data verified by an independent NCQA certified auditor. Pages 5 and 13 detail the data collection methods used by Medicaid and commercial HMOs for this report.

HEDIS measures include, for example, the percent of children who received the recommended number of well-child visits, or the percent of women who started prenatal care in the first trimester of pregnancy. In addition to preventive health measures, HEDIS includes measures for the percent of doctors in an HMO who have completed their residency training and the percent who have obtained board certification in their speciality area.

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Executive Summary

Today, approximately 70 percent of Utahns are enrolled in some kind of managed care organization. This report presents the performance of Utah's Medicaid and commercial Health Maintenance Organizations (HMOs) using HEDIS measures collected for calendar year 2000. The goals of this report are to increase consumer awareness and to assist health plans in improving service and care. Four Medicaid HMOs and five commercial (non-governmental) HMOs provided the performance information used in this report.

Key findings:

- ✓ For seven out of twelve measures, Utah's Medicaid HMOs showed better performance than other states' Medicaid programs. Areas where Utah Medicaid HMOs' scores were higher than the national average are: cholesterol level and eye exams as part of comprehensive diabetes care, well-child visits (ages 3-6), immunizations by age 2, early prenatal care for pregnant women, checkups for new mothers, and adult's access to care (ages 20-44).
- ✓ Utah's commercial HMOs were below the national average in nine out of twelve measures.
- ✓ However, Utah's commercial HMOs had significantly higher averages than their Medicaid counterparts in five out of twelve areas: breast cancer screening, cervical cancer screening, well-child visits (0-15 months), postpartum care, and adult's access to care (ages 20-44).
- ✓ Utah's Medicaid HMOs had significantly higher averages than their commercial counterparts in cholesterol level and eye exams as part of comprehensive diabetes care, adolescent well-care visits, immunizations by age 2, and early prenatal care.
- ✓ Among Utah's Medicaid HMOs, the greatest variation in scores was found in the following measure: six or more well-child visits for 0-15 month infants (lowest HMO: 7%, highest HMO: 51%, gap=44%).
- ✓ Among Utah's commercial HMOs, the greatest variation in scores was found in the following measure: early prenatal care for pregnant women (lowest HMO: 24%, highest HMO: 94%, gap=70%).

The large variations may be caused by substandard performance OR different data reporting practices among HMOs. Each HMO may want to identify areas where they can benefit from improving service quality or enhancing data reporting.

How to Read this Report

In this report, each performance measure is reported in two ways: in a star table and in a bar graph.

Star tables

Tables with stars summarize Utah HMOs' performance and show how the HMOs compare to the statewide average.

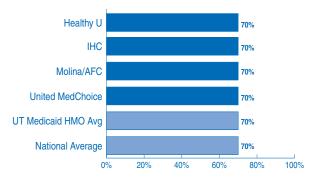
Stars compare each HMO's score to the average for Utah HMOs. Three stars indicate that an HMO's performance on a particular measure is significantly above the state average, while one star shows that an HMO's performance on a particular measure is significantly below the state average. Two stars indicate that an HMO's performance on a particular measure is not significantly below or above the state average.

Performance Compared to the Average

- ** Higher HMO score is above the average for Utah HMOs.
- ★★ Average HMO score is neither higher nor lower than the Utah HMO average.
- ★ Lower HMO score is below the average for Utah HMOs.

Bar graphs

Bar graphs show each HMO's actual score for each measure. Bar graphs like the one shown below display the percent of HMO members who received the specified care according to HEDIS measures. The Utah HMO Average bar represents the average for all participating Utah HMOs. The National Average bar at the bottom of each graph represents the Medicaid (pages 7, 9 and 11) or commercial (pages 15, 17 and 19) national average for HMOs.



Facts about Utah Medicaid HMOs

	Healthy U	IHC Access	Molina/AFC	United MedChoice
Counties served by each HMO	Davis Salt Lake Utah Weber	Davis Salt Lake Utah Weber	Davis Salt Lake Utah Weber	Davis Salt Lake Weber
Monthly enrollment as of January 31, 2001	7,401	35,648	11,885	31,401
Primary Care Providers completed residency	NR	88.7%	100%	NR
Primary Care Providers board certified	NR	85.3%	98.5%	NR
Obstetricians/gynecologists completed residency	NR	86.2%	100%	NR
Obstetricians/gynecologists board certified	NR	86.2%	100%	NR
Pediatric Practitioner Specialists completed residency	NR	100%	NR	NR
Pediatric Practitioner Specialists board certified	NR	98.4%	NR	NR

NR = Not Reported

Customer Service Numbers

 Healthy U
 1-888-271-5870
 Molina/AFC
 1-888-483-0760

 IHC Access
 1-800-538-5038
 United MedChoice
 1-800-824-9313

Methods of HEDIS Collection

How was the information collected?

HMOs collect HEDIS data from administrative and/or medical records at the physician's office. For some measures, HMOs can choose to use administrative data only. However, in such cases, the level of detail may be lost; therefore, the results may not accurately reflect what is going on. Below are the HEDIS measures covered in this report and their corresponding method of data collection by each Medicaid HMO. Non-standardized data collection can reduce comparability of data across HMOs. For more information about the two methods and how they might impact results, please call the Office of Health Care Statistics at (801) 538-7048.

Data Collection Methods

Administrative: HMOs use their own databases to calculate HEDIS scores.

Hybrid: HMOs acquire HEDIS data through administrative databases **and** medical records.

HEDIS Measure	Healthy U	IHC Access	Molina/ AFC	United MedChoice
Breast Cancer Screening	Α	НО	Α	А
Cervical Cancer Screening	Α	НО	Α	Α
Diabetes Care: Cholesterol Level (LDL)	NR	НО	НО	НО
Diabetes Care: Eye Exams	NR	НО	НО	НО
Six+ Checkups 0-15 Month Infants	NR	НО	Α	Α
One+ Checkup Per Year, Ages 3-6	NR	НО	Α	Α
One+ Checkup Per Year, Ages 12-21	NR	НО	Α	Α
Immunizations By Age 2	NR	НО	НО	НО
Early Prenatal Care for Pregnant Women	NR	НО	НО	НО
Checkups for New Mothers	NR	НО	НО	НО
Cesarean Section Delivery Rate	NS	NS	NS	NS
Adult's Access to Care, Ages 20-44	NR	Α	Α	Α

Α	Administrative	NR	Not Reported
НО	Hybrid	NS	Not Specified

Staying Healthy

Preventive Care



Stars compare each HMO's score to the average score for Utah Medicaid HMOs and show differences among HMOs. Three stars mean the HMO's performance is higher than the average. If an HMO has two stars, the HMO's performance on the topic is average. Just because an HMO has one star does not necessarily mean its overall performance is substandard. Graphs on the next page show scores for each plan on these topics.

- ★★★ Higher HMO score is above the average for Utah Medicaid HMOs.
- **Average** HMO score is neither higher nor lower than the Utah Medicaid HMO average.
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НМО	Breast Cancer Screening	Cervical Cancer Screening	Diabetes Care: Cholesterol Level (LDL)	Diabetes Care: Eye Exams
Healthy U	***	*	NR	NR
IHC Access	***	***	***	**
Molina/AFC	*	*	*	*
United MedChoice	**	**	*	***
				NR = Not Reported

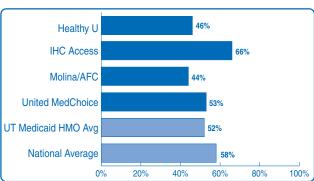
Breast Cancer Screening

When breast cancer is discovered early, women have more treatment choices and better chances for survival. This graph shows the percent of women ages 52-69 who had a mammogram (a test to find breast cancer) within the past 2 years.

Cervical Cancer Screening

Deaths from cervical cancer are significantly reduced by early detection through a Pap smear test to find cervical cancer. This graph shows the percent of adult women ages 21-64 who had at least one Pap smear test within the past 3 years.



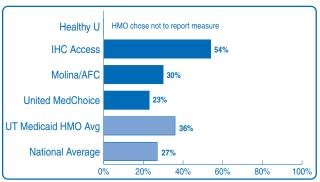


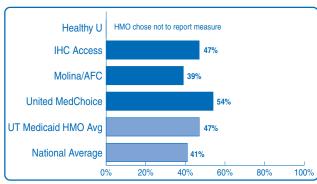
Diabetes Care: Cholesterol Level (LDL)

Low levels of LDL cholesterol has been shown to reduce the risk of cardiovascular disease. This graph illustrates the percent of diabetics whose LDL level was <130 mg/dl in the past year.

Diabetes Care: Eye Exams

Blindness from diabetes can be reduced with early detection through eye exams. This graph shows the percent of members with diabetes who received an eye exam in the past year.





Source of National Average: http://www.ncqa.org/Programs/HEDIS/00medicaidmeasures.htm

Healthy Children

Child and Adolescent Care



Stars compare each HMO's score to the average score for Utah Medicaid HMOs and show differences among HMOs. Three stars mean the HMO's performance is higher than the average. If an HMO has two stars, the HMO's performance on the topic is average. Just because an HMO has one star does not necessarily mean its overall performance is substandard. Graphs on the next page show scores for each plan on these topics.

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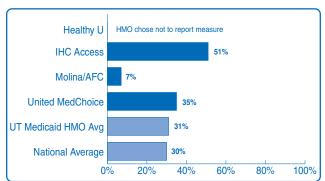
НМО	Six+ Checkups 0-15 Month Infants	One+ Checkup per Year, Ages 3-6	One+ Checkup per Year, Ages 12-21	Immunizations by Age 2
Healthy U	NR	NR	NR	NR
IHC Access	***	***	***	***
Molina/AFC	*	*	*	*
United MedChoice	***	***	**	*
				NR = Not Reported

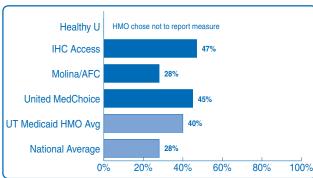
Six+ Checkups for 0-15 Month Infants

Regular checkups are one of the best ways to detect physical, developmental, behavioral, and emotional problems. This graph shows the percent of 0-15 month old infants who had six or more well-child visits in 2000.

One+ Checkups per Year, Ages 3-6

It is important to detect vision, speech and language problems early. Intervention can improve communication skills and avoid or reduce learning problems. This graph shows the percent of children, ages 3-6, who had at least one well-child checkup in 2000.



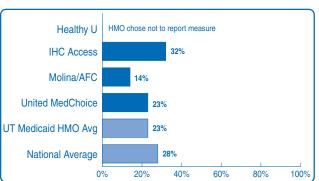


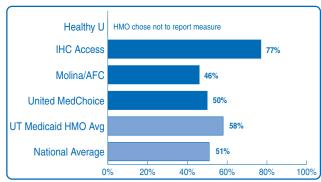
One+ Checkup per Year, Ages 12-21

A well-care visit provides preventive health care that looks at physical, emotional and social aspects of health. This graph shows the percent of adolescents, ages 12-21, who had at least one such visit in 2000.

Immunizations by Age 2

Immunizations prevent childhood diseases such as polio, measles, mumps, rubella and whooping cough. This graph illustrates the percent of children who received recommended immunizations by the age of 2*.





^{*} Four DTP or DTaP, three OPV or IPV, one MMR, two HiB and three hepatitis B vaccinations. Source of National Average: http://www.ncga.org/Programs/HEDIS/00medicaidmeasures.htm

Prenatal Care Access to Care



Stars compare each HMO's score to the average score for Utah Medicaid HMOs and show differences among HMOs. Three stars mean the HMO's performance is higher than the average. If an HMO has two stars, the HMO's performance on the topic is average. Just because an HMO has one star does not necessarily mean its overall performance is substandard. Graphs on the next page show scores for each plan on these topics.

Performance Compared to the Average

- *** Higher HMO score is above the average for Utah Medicaid HMOs.
 - **Average** HMO score is neither higher nor lower than the Utah Medicaid HMO average.
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НМО	Early Prenatal Care for Pregnant Women	Checkups for New Mothers	Cesarean Section Delivery Rate*	Adult's Access to Care, Ages 20-44
Healthy U	NR	NR	*	NR
IHC Access	***	***	***	***
Molina/AFC	***	**	***	**
United MedChoice	*	*	*	***

NR = Not Reported

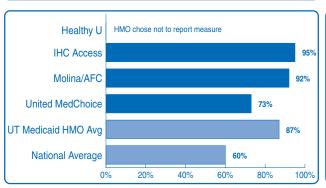
^{*}Since stars for this measure do not have the same meaning as in the other measures, a different color is used here. See page 11 for details on Cesarean Section Delivery Rate.

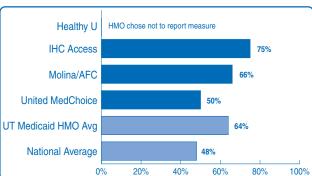
Early Prenatal Care for Pregnant Women

Early prenatal care contributes to having a healthy baby. This graph illustrates the percent of women who had their first prenatal visit during the first 13 weeks of pregnancy.

Checkups for New Mothers

During a visit, providers can check a new mother's recovery from childbirth and answer any questions. This graph shows the percent of new mothers who received a checkup within eight weeks of delivery.



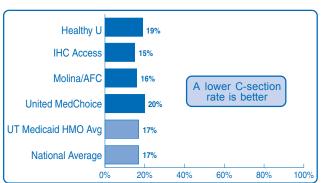


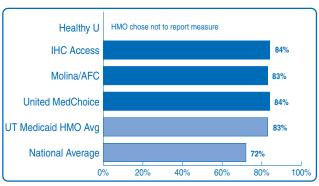
Cesarean Section Delivery Rate*

Like all surgeries, Cesarean section deliveries require longer recovery times than vaginal births. Complications are more common with babies born by C-section. This graph illustrates the percent of births delivered by C-section, a procedure for surgical delivery.

Adult's Access to Care, Ages 20-44

Access to care implies that care is available, patients know of its availability, and they know how to obtain services when needed. The indicator of access used here is the percent of adults aged 20-44 who received preventive or ambulatory (walk-in) care.





^{*}Cesarean sections can be lifesaving for mother or baby when performed appropriately. However, C-sections result in longer hospital stays, recovery times, and higher costs. This procedure should not be used solely for the convenience of doctor or patient. High C-section rates may indicate unnecessary procedures are being performed and should prompt further investigation to determine if that is true.

Source of National Average: http://www.ncqa.org/Programs/HEDIS/00medicaidmeasures.htm

Facts about Utah Commercial HMOs

	Altius	CIGNA	IHC	RBCBS	UHC
Counties served by each HMO	Box Elder Cache Carbon Davis Juab Morgan Salt Lake Sanpete Summit Tooele Uintah Utah Wasatch Weber	Box Elder Davis Emery Millard Morgan Salt Lake Sanpete Sevier Summit Tooele Utah Wasatch Weber	IHC Care: All Counties IHC SelectMed: Beaver/Box Elder Cache/Davis Duchesne/ Garfield/Iron/ Juab/Millard/ Morgan/Piute/ Salt Lake/ Sanpete/Sevier/ Summit/Tooele/ Utah/Wasatch/ Weber/Wayne	Box Elder Cache Davis Morgan Summit Tooele Utah Wasatch Weber	All Counties, except Piute
Monthly enrollment as of January 31, 2001	45,616	30,791	394,431	11,311	130,494
Primary Care Providers completed residency	99.4%	NR	87.9%	100%	98.9%
Primary Care Providers board certified	81.4%	83.0%	87.9%	44.1%	83.5%
Obstetricians/gynecologists completed residency	100%	NR	86.3%	100%	100%
Obstetricians/gynecologists board certified	85.2%	82.0%	84.2%	47.7%	86.5%
Pediatric Practitioner Specialists completed residency	100%	NR	100%	100%	97.1%
Pediatric Practitioner Specialists board certified	98.0%	51.5%	98.4%	50.0%	84.6%

Customer Service Numbers

	Oustonici Ocivi	oc itallibers	
Altius	1-801-323-6200	CIGNA	1-800-245-2471
IHC	1-800-538-5038	RBCBS	1-800-624-6519
UnitedHealthcare (UHC)	1-800-824-9313		

NR = Not Reported

Methods of HEDIS Collection

How was the information collected?

HMOs collect HEDIS data from administrative and/or medical records at the physician's office. For some measures, HMOs can choose to use administrative data only. However, in such cases, the level of detail may be lost; therefore, the results may not accurately reflect what is going on. Below are the HEDIS measures covered in this report and their corresponding method of data collection by each Medicaid HMO. Non-standardized data collection can reduce comparability of data across HMOs. For more information about the two methods and how they might impact results, please call the Office of Health Care Statistics at (801) 538-7048.

Data Collection Methods

Administrative: HMOs use their own databases to calculate HEDIS scores.

Hybrid: HMOs acquire HEDIS data through administrative databases *and* medical records.

HEDIS Measure	Altius	CIGNA	IHC	RBCBS	UHC
Breast Cancer Screening	НО	НО	НО	Α	Α
Cervical Cancer Screening	НО	НО	НО	Α	Α
Cholesterol Level (LDL)	НО	НО	НО	Α	НО
Diabetic Eye Exams	НО	НО	НО	Α	НО
Six+ Checkups 0-15 Month Infants	НО	Α	НО	Α	Α
One+ Checkup Per Year, Ages 3-6	НО	A*	НО	Α	Α
One+ Checkup Per Year, Ages 12-21	НО	A*	НО	Α	Α
Immunizations By Age 2	НО	НО	НО	Α	НО
Early Prenatal Care for Pregnant Women	НО	НО	НО	Α	НО
Checkups for New Mothers	НО	НО	НО	Α	НО
Cesarean Section Delivery Rate	NS	NS	NS	NS	NS
Adult's Access to Care, Ages 20-44	Α	Α	Α	Α	Α

^{*}HMO rotated measure from previous year's HEDIS data. See www.ncqa.org for more information about rotation strategies.

A Administrative HO Hybrid NS Not Specified

Staying Healthy

Preventive Care



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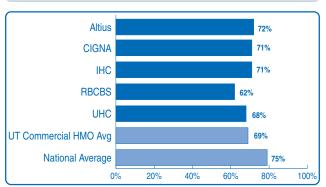
НМО	Breast Cancer Screening	Cervical Cancer Screening	Diabetes Care: Cholesterol Level (LDL)	Diabetes Care: Eye Exams
Altius	***	***	***	***
CIGNA	***	***	***	*
IHC	***	***	***	***
RBCBS	*	*	*	*
UHC	**	***	*	***

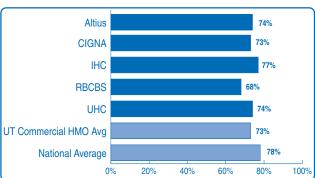
Breast Cancer Screening

When breast cancer is discovered early, women have more treatment choices and better chances for survival. This graph shows the percent of women ages 52-69 who had a mammogram (a test to find breast cancer) within the past 2 years.

Cervical Cancer Screening

Deaths from cervical cancer are significantly reduced by early detection through a Pap smear test to find cervical cancer. This graph shows the percent of adult women ages 21-64 who had at least one Pap smear test within the past 3 years.



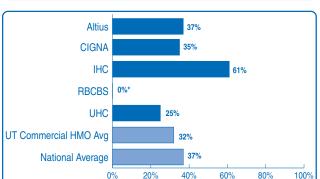


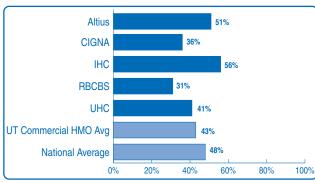
Diabetes Care: Cholesterol Level (LDL)

Low levels of LDL cholesterol has been shown to reduce the risk of cardiovascular disease. This graph illustrates the percent of diabetics whose LDL level was <130 mg/dl in the past year.

Diabetes Care: Eye Exams

Blindness from diabetes can be reduced with early detection through eye exams. This graph shows the percent of members with diabetes who received an eye exam in the past year.





^{*} May be due to under-reporting of measure. See page 13 for data collection method.

Source of National Average: NCQA 2001. "The State of Managed Care Quality." NCQA Website: www.ncqa.org

Healthy Children

Child and Adolescent Care



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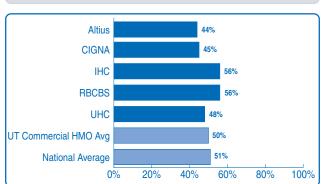
НМО	Six+ Checkups 0-15 Month Infants	One+ Checkup per Year, Ages 3-6	One+ Checkup per Year, Ages 12-21	Immunizations by Age 2
Altius	*	***	***	**
CIGNA	*	**	*	**
IHC	***	**	***	***
RBCBS	***	**	*	*
UHC	**	**	**	**

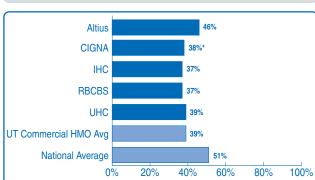
Six+ Checkups for 0-15 Month Infants

Regular checkups are one of the best ways to detect physical, developmental, behavioral, and emotional problems. This graph shows the percent of 0-15 month old infants who had six or more well-child visits in 2000.

One+ Checkups per Year, Ages 3-6 It is important to detect vision, speech and language problems early. Intervention can improve communication skills and avoid or

improve communication skills and avoid or reduce learning problems. This graph shows the percent of children, ages 3-6, who had at least one well-child checkup in 2000.



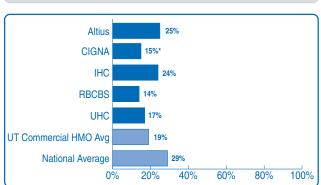


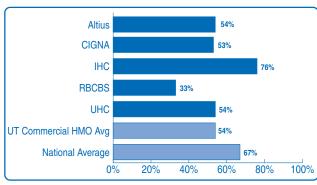
One+ Checkup per Year, Ages 12-21

A well-care visit provides preventive health care that looks at physical, emotional and social aspects of health. This graph shows the percent of adolescents, ages 12-21, who had at least one such visit in 2000.

Immunizations by Age 2

Immunizations prevent childhood diseases such as polio, measles, mumps, rubella and whooping cough. This graph illustrates the percent of children who received recommended immunizations by the age of 2**.





^{*}Rotated measure: number obtained from 2000 HEDIS data.

Source of National Average: NCQA 2001. "The State of Managed Care Quality." NCQA Website: www.ncqa.org

^{**}Four DTP or DTaP, three OPV or IPV, one MMR, two HiB and three hepatitis B vaccinations.

Prenatal Care Access to Care



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 - ★★ Average HMO score is neither higher nor lower than the Utah commercial HMO average.
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НМО	Early Prenatal Care for Pregnant Women	Checkups for New Mothers	Cesarean Section Delivery Rate*	Adult's Access to Care, Ages 20-44
Altius	***	***	*	*
CIGNA	***	***	***	***
IHC	***	***	**	**
RBCBS	*	*	***	***
UHC	*	**	**	***

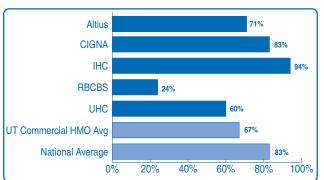
^{*}Since stars for this measure do not have the same meaning as in the other measures, a different color is used here. See page 11 for details on Cesarean Section Delivery Rate.

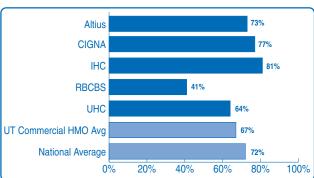
Early Prenatal Care for Pregnant Women

Early prenatal care contributes to having a healthy baby. This graph illustrates the percent of women who had their first prenatal visit during the first 13 weeks of pregnancy.

Checkups for New Mothers

During a visit, providers can check a new mother's recovery from childbirth and answer any questions. This graph shows the percent of new mothers who received a checkup within eight weeks of delivery.



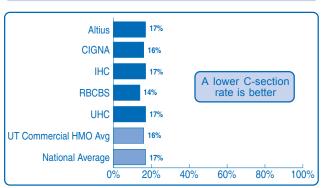


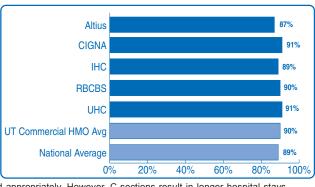
Cesarean Section Delivery Rate*

Like all surgeries, Cesarean section deliveries require longer recovery times than vaginal births. Complications are more common with babies born by C-section. This graph illustrates the percent of births delivered by C-section, a procedure for surgical delivery.

Adult's Access to Care, Ages 20-44

Access to care implies that care is available, patients know of its availability, and they know how to obtain services when needed. The indicator of access used here is the percent of adults aged 20-44 who received preventive or ambulatory (walk-in) care.





^{*}Cesarean sections can be lifesaving for mother or baby when performed appropriately. However, C-sections result in longer hospital stays, recovery times, and higher costs. This procedure should not be used solely for the convenience of doctor or patient. High C-section rates may indicate unnecessary procedures are being performed and should prompt further investigation to determine if that is true.

Source of National Average: http://www.ncqa.org/Programs/HEDIS/00medicaidmeasures.htm

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